

Washington State Planning Grant on Access to Health Insurance
OVERVIEW OF SAFETY NET DATA SOURCES – Work in Progress

DATA AREA	SOURCE	FREQUENCY OF DATA	GEOGRAPHICAL AVAILABILITY	NOTES
Safety Net				
<i>Location of CHCs/RHC's</i>	Department of Social and Health Services, Medical Assistance Administration	Annual	List of Clinics (attributable by County)	Obtained list of FQHC/RHCs. Question: Is this a comprehensive list of CHCs? Are data available that describe other resources, i.e., community providers? Consider examining the relationship between numerical/geographic adequacy and provision of critical services given the scope, timing and resources available.
<i>Community Health Services, Charity Care</i>	Health Care Authority	Annual	List of Clinics (attributable by County)	Obtained list of HCA Funded Community Clinics.
<i>Charity Care</i>	CHARS Dataset, Department of Health, CHS.	Annual	Statewide	Need to understand payer categories, especially self pay vs. charity care. Consider what additional data may be informative at service-specific level. May also examine relationship between charity care/Medicaid revenue and services.
<i>Safety Net admissions as a percent of total admissions, and as % of population under 200% FPL</i>	RAND Market Characteristics Database	Annual	MSAs and rural counties in WA	Database is under construction, although summary statistics are available for 1990-1998. Variables that have 200 percent of poverty population as denominator are available at county level only.
<i>Average hours of charity care, ambulatory settings.</i>	RAND Market Characteristics Database	Annual	MSAs	Database is under construction, although summary statistics are available for 1990 to 1998.
<i>Federal and local disproportionate share payments</i>	Rutgers Safety Net Assessment	Annual?	County	Database is under construction, data depending on availability.

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Access to Health Care				
<i>Primary Care Health Professional Shortage Areas</i>	Department of Health	Semi-Annual	Available by Health Service Areas.	Need to work with DOH to develop summary presentation of key findings and implications for access to care.
<i>Survey data on access to primary care provider, doctor visits, etc.</i>	Behavioral Risk Factor Surveillance System	Annual	Statewide. Some counties (e.g. King, Snohomish) sponsor enhanced samples to support local area estimates	While useful the survey is limited by the type of questions asked. Results do not include children. Potential questions to consider: Can we link survey questions to uninsured status? Geography? Other factors? Examine the following survey questions: When was your last check up? Do you have a personal doctor or clinic? Do you have a place you go to when sick or need advice?
<i>Survey data on access to (primary care provider, doctor visits, etc.</i>	National Survey of America's Families, Urban Institute	Semi-annual (1997 and 1999 thus far)	Statewide	Results for children only. Examine methodology and compare to BRFSS with the following questions in mind: Is there overlap and what are the inconsistencies between the two surveys?
<i>HEDIS Data on immunizations, etc.</i>	Medical Assistance Administration/ health plans	Annual	Available statewide for particular public plans (Medicaid, PEBB)	Need to identify sources- MAA? HCA? Health plans? Need to define what measures mean in terms of indicators of access.
<i>Consumer Assessment of Health Plan Survey (CAHPS)</i>	Medical Assistance Administration HCA?	Annual	Statewide	Results for Medicaid. Investigate whether information on other sources, such as health plans, is available and useful as indicator of access.

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<i>EPSDT Early and Periodic Screening Diagnosis and Treatment</i>	Medical Assistance Administration	Annual	Available for Medicaid by plan and for FFS.	Results for Medicaid.
<i>Potentially avoidable hospitalizations</i>	DOH			Investigate measures and data sources for relevance.
<i>Local plan adequacy</i>	OIC, MAA, HCP.			Need to define what information is available and avoid overlap when defining adequacy. Question: How to interpret plan vs. community network adequacy? How to address overlapping networks?